camp rosie

city of glendale commission on the status of women www.glendaleca.gov/women



Camp Rosie, now in its eight year at the City of Glendale, was developed for teens in middle and high school between 12 and 18 years of age in order to empower them to make personal, educational, financial, and career choices so they can achieve self-sufficiency, career satisfaction, and long-term financial security.

The Commission on the Status of Women collaborates with many local service providers and other City departments to bring Camp Rosie to Glendale. Throughout both sessions of Camp Rosie, the teens will focus on self-development and enrichment, and learn essential skills for success and financial literacy. Additionally, good communication skills, fitness and nutrition, and self-defense skills will be taught and discussed in the Camp. Camp Rosie will also focus on increasing civic engagement, certify the teens in CPR, provide them the opportunity to visit a college campus, and introduce them to non-traditional careers.

Camp will be held at the Pacific Community Center, 501 S. Pacific Ave in Glendale. There are two sessions to choose from:

□ Session One: June 16 – July 3
 □ Session Two: July 7 – July 24
 Mon – Thurs, 12:30 – 5:30 pm
 □ Mon – Thurs, 12:30 – 5:30 pm

Teens from low income families are encouraged to apply to this **free camp.** To apply for Camp Rosie, please complete and return the form on the back of this page in one of the following three ways:

■ MAIL → 613 E. Broadway, Suite 120, Glendale, CA 91206

■ FAX → (818) 548-3789

■ EMAIL → women@glendaleca.gov

For more information, please call (818) 548-2000 or email women@glendaleca.gov.

	CAMP ROSIE	APPLICATION	ON					
STUDENT NAME (Last, Fire	st, Middle Initial)							
Street Address	City		. —— Sta	 State		Zip		
Home Phone	Date of Birth	. <u>A</u>	ge	 .		Grade		
Mobile Phone Number	Email Address School							
ARENT NAME PARENT Email Address				Daytime Contact Number				
Please indicate which se	ession you would like	to attend (ci	rcle one):	: 5	Session	າ 1	Sessio	
Please answer the foll	owing questions					Yes	No	
Do you live/go to school in G	ilendale?							
Are you related to any City o Member, and/or a Glendale			the Status	of Wom	ien			
If YES please print Name and	d Board or Department:							
Do you receive Government	Assistance? (Welfare/Ca	al Works, AFD	C etc.)					
Total number of people living	g at home, including you	urself		1				
Total income of people living at home, including yourself		Monthly Yearly	\$ \$					
at nome, melading yoursein			rearry	<u> </u>				
Signature of the person who is receiving Government Assistance (if applicable)			Print the name of the person who is receiving Government Assistance (if applicable)					
I hereby certify that all ans agree and understand my	•	• •		-	-		d, I	
Signature of Applicant			Date					
Parent Signature (If Appli	cant is under 18)		Dat	е				